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Document Page 1 of 9 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re: HERNANDEZ, EVERARDO	§ Case No. 15-81168-LMT
HERNANDEZ, VANESSA G.	§
	§
Debtor(s)	§

TRUSTEE'S FINAL REPORT (TFR)

The undersigned trustee hereby makes this Final Report and states as follows:

- 1. A petition under Chapter 7 of the United States Bankruptcy Code was filed on April 28, 2015. The undersigned trustee was appointed on April 28, 2015.
 - 2. The trustee faithfully and properly fulfilled the duties enumerated in 11 U.S.C. §704.
- 3. All scheduled and known assets of the estate have been reduced to cash, released to the debtor as exempt property pursuant to 11 U.S.C. § 522, or have been or will be abandoned pursuant to 11 U.S.C. § 554. An individual estate property record and report showing the disposition of all property of the estate is attached as **Exhibit A.**
 - 80,000.00 4. The trustee realized the gross receipts of Funds were disbursed in the following amounts: Payments made under an interim distribution 34,810.00 Administrative expenses 28,318.04 Bank service fees 11.47 Other payments to creditors 0.00Non-estate funds paid to 3rd Parties 0.00Exemptions paid to the debtor 0.00 Other payments to the debtor 0.00

Leaving a balance on hand of $\frac{1}{2}$

The remaining funds are available for distribution.

5. Attached as **Exhibit B** is a cash receipts and disbursements record for each estate bank account.

16,860,49

¹ The balance of funds on hand in the estate may continue to earn interest until disbursed. The interest earned prior to disbursement will be distributed pro rata to creditors within each priority category. The trustee may receive additional compensation not to exceed the maximum compensation set forth under 11 U.S.C. § 326(a) on account of the disbursement of the additional interest.

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- 6. The deadline for filing non-governmental claims in this case was 09/09/2015 and the deadline for filing governmental claims was 10/26/2015. All claims of each class which will receive a distribution have been examined and any objections to the allowance of claims have been resolved. If applicable, a claims analysis, explaining why payment on any claim is not being made, is attached as **Exhibit C**.
 - 7. The Trustee's proposed distribution is attached as **Exhibit D**.
- 8. Pursuant to 11 U.S.C. § 326(a), the maximum compensation allowable to the trustee is \$6,500.00. To the extent that additional interest is earned before case closing, the maximum compensation may increase.

The trustee has received \$0.00 as interim compensation and now requests the sum of \$6,500.00, for a total compensation of $$6,500.00.^2$ In addition, the trustee received reimbursement for reasonable and necessary expenses in the amount of \$0.00 and now requests reimbursement for expenses of \$0.00, for total expenses of $$0.00.^2$

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Date: 02/10/2016	By:/s/BERNARD J. NATALE
	Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. §1320.4(a)(2) applies.

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Form 1 **Individual Estate Property Record and Report Asset Cases**

Case Number: 15-81168-LMT

HERNANDEZ, EVERARDO HERNANDEZ, VANESSA G.

Period Ending: 02/10/16

Case Name:

Trustee: (330370)BERNARD J. NATALE

Filed (f) or Converted (c): 04/28/15 (f)

§341(a) Meeting Date: 06/04/15 **Claims Bar Date:** 09/09/15

	1	2	3	4	5	6
Ref.#	Asset Description (Scheduled And Unscheduled (u) Property)	Petition/ Unscheduled Values	Estimated Net Value (Value Determined By Trustee, Less Liens, Exemptions, and Other Costs)	Property <u>Abandoned</u> OA=§554(a)	Sale/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
1	Deposits of Money (BMO Harris Checking)	190.00	0.00		0.00	FA
2	Deposits of Money (BMO Harris Savings)	3,412.00	0.00		0.00	FA
3	Couch, Television and Bedroom Set	550.00	0.00		0.00	FA
4	Kitchen Utensils and Microwave	100.00	0.00		0.00	FA
5	Wearing Apparel	450.00	0.00		0.00	FA
6	Jewelry	250.00	0.00		0.00	FA
7	Home Computer and Printer	200.00	0.00		0.00	FA
8	401(k) Plan	3,500.00	3,400.00		0.00	FA
9	Personal Injury Claim [Car Accident] (Offered \$4	40,000.00	25,000.00		80,000.00	FA
10	2013 Chevrolet Malibu (55,000 miles)	15,000.00	0.00		0.00	FA
11	2002 GMC Envoy (177,000 miles) (Joint with Mothe	4,000.00	0.00		0.00	FA
11	Assets Totals (Excluding unknown values)	\$67,652.00	\$28,400.00		\$80,000.00	\$0.00

Major Activities Affecting Case Closing:

June 30, 2017 Initial Projected Date Of Final Report (TFR): **Current Projected Date Of Final Report (TFR):** June 30, 2017

Printed: 02/10/2016 10:06 AM V.13.25

Exhibit A

Page: 1

Exhibit B

Page: 1

\$16,860.49

Form 2 Cash Receipts And Disbursements Record

Case Number: 15-81168-LMT

HERNANDEZ, EVERARDO

HERNANDEZ, VANESSA G.

Period Ending: 03/14/16

Taxpayer ID #: **-***4736

Case Name:

Trustee: BERNARD J. NATALE (330370)

Bank Name: Rabobank, N.A.

*******66 - Checking Account Account: Blanket Bond: \$8,842,000.00 (per case limit)

Separate Bond: N/A

1	2	3	4		5	6	7
Trans. Date	{Ref #} / Check #	Paid To / Received From	Description of Transaction	T-Code	Receipts \$	Disbursements \$	Checking Account Balance
01/25/16	(9}	Geico General Insuance Co.	Pymt of Settlement Funds for PI Cause of Action	1129-000	80,000.00		80,000.00
01/27/16	101	Clark Jsten Zuccki Frost & Williams	Pymt of Spec Counsel Attorney Fees	3210-600		26,666.66	53,333.34
01/27/16	102	Clark Jsten Zuccki Frost & Williams	Payment of Special Counsel Costs & Expenses	3220-610		1,651.38	51,681.96
01/27/16	103	Adult & Pediatric Orthopedics	Payment of Medical Lien	4210-000		710.00	50,971.96
01/27/16	104	Integrity Medical	Payment of Medical Lien	4210-000		706.00	50,265.96
01/27/16	105	Farmers Insurance	Payment of subrogation lien	4210-000		5,000.00	45,265.96
01/27/16	106	American Diagnostic MRI	Payment of Medical Lien	4210-000		1,700.00	43,565.96
01/27/16	107	Active Rehab & Wellness	Payment of Medical Lien	4210-000		4,254.69	39,311.27
01/27/16	108	Optum United Health Care	Payment of Medical Lien	4210-000		7,439.31	31,871.96
01/27/16	109	Everardo Hernandez	Payment of Debtor's Personal Injury Exemption	8100-002		15,000.00	16,871.96
01/29/16		Rabobank, N.A.	Bank and Technology Services Fee	2600-000		11.47	16,860.49

ACCOUNT TOTALS 80,000.00 63,139.51 Less: Bank Transfers 0.00 0.00 80,000.00 63,139.51 Subtotal Less: Payments to Debtors 15,000.00 \$48,139.51 **NET Receipts / Disbursements** \$80,000.00

80,000.00 Net Receipts: Less Payments to Debtor: 15,000.00 Net Estate : \$65,000.00

	Net	Net	Account
TOTAL - ALL ACCOUNTS	Receipts	Disbursements	Balances
Checking # *******66	80,000.00	48,139.51	16,860.49
	\$80,000.00	\$48,139.51	\$16,860.49

{} Asset reference(s) Printed: 03/14/2016 10:40 AM V.13.25 Case 15-81168 Doc 34 Filed 03/15/16 Entered 03/15/16 14:57:35 Desc Main Document Page 5 of 9

Claims Bar Date: September 9, 2015

EXHIBIT C ANALYSIS OF CLAIMS REGISTER

Case Number:15-81168-LMTPage: 1Date:February 10, 2016Debtor Name:HERNANDEZ, EVERARDOTime: 10:06:28 AM

Claim #	Creditor Name & Address	Claim Type	Claim Ref. No. / Notes	Amount Allowed	Paid to Date	Claim Balance
EXP 199	ATTY. BERNARD J. NATALE 1639 N ALPINE ROAD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Admin Ch. 7		\$56.10	\$0.00	56.10
ATTY 199	ATTY. BERNARD J. NATALE 1639 N ALPINE ROAD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Admin Ch. 7	Atty Fees for BJN - \$2096.25 a	\$2,246.25 and Atty Fees for MB	\$0.00 s - \$150.00	2,246.25
TRTE 199	BERNARD J. NATALE 1639 N ALPINE RD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Admin Ch. 7		\$6,500.00	\$0.00	6,500.00
SPEXP 199	Clark Jsten Zuccki Frost & Williams Attn: Kevin P Justen 7320 N Alpine Road Rockford, IL 61111	Admin Ch. 7	Per order entered on 11/25/15.	\$1,651.38	\$1,651.38	0.00
SPCOUN 199	Clark Jsten Zuccki Frost & Williams Attn: Kevin P Justen 7320 N Alpine Road Rockford, IL 61111	Admin Ch. 7	Per order entered on 11/25/15.	\$26,666.66	\$26,666.66	0.00
3 570	Internal Revenue Service P. O. Box 7346 Philadelphia, PA 19101-7346	Priority		\$1,398.48	\$0.00	1,398.48
9 950	AmeriCredit Financial Services, Inc. dba GM Financial P O Box 183853 Arlington, TX 76096	Secured		\$21,171.51	\$0.00	21,171.51
EXEMPT 950	Everardo Hernandez	Secured	P I EXEMPTION Per ordered entered on 11/25/	\$15,000.00 15.	\$15,000.00	0.00
MEDLN1 950	Adult & Pediatric Orthopedics	Secured	Per ordered entered on 11/25/	\$710.00 15.	\$710.00	0.00
MEDLN2 950	Integrity Medical	Secured	Per ordered entered on 11/25/	\$706.00 15.	\$706.00	0.00
MEDLN3 950	American Diagnostic MRI	Secured	Per ordered entered on 11/25/	\$1,700.00 15.	\$1,700.00	0.00
MEDLN4 950	Active Rehab & Wellness	Secured	Per ordered entered on 11/25/	\$4,254.69 15.	\$4,254.69	0.00
MEDLN5 950	Optum United Health Care	Secured	Per ordered entered on 11/25/	\$7,439.31 15.	\$7,439.31	0.00
SUBLN1 950	Farmers Insurance	Secured	Per ordered entered on 11/25/	\$5,000.00 15.	\$5,000.00	0.00
1 610	Cavalry SPV I, LLC 500 Summit Lake Drive, Ste 400 Valhalla, NY 10595	Unsecured		\$1,711.68	\$0.00	1,711.68

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Claims Bar Date: September 9, 2015

EXHIBIT C ANALYSIS OF CLAIMS REGISTER

Case Number:15-81168-LMTPage: 2Date:February 10, 2016Debtor Name:HERNANDEZ, EVERARDOTime: 10:06:28 AM

Debioi P	vame. HERNANDEZ, EVERARDO				1 mie. 10.00.	Zo Alvi
Claim #	Creditor Name & Address	Claim Type	Claim Ref. No. / Notes	Amount Allowed	Paid to Date	Claim Balance
2 610	Cavalry SPV I, LLC 500 Summit Lake Drive, Ste 400 Valhalla, NY 10595	Unsecured		\$2,963.88	\$0.00	2,963.88
4 610	Midland Credit Management, Inc as agent for Midland Funding LLC PO Box 2011 Warren, MI 48090	Unsecured		\$514.26	\$0.00	514.26
5 610	Capital One Bank (USA), N.A. PO Box 71083 Charlotte, NC 28272-1083	Unsecured		\$325.15	\$0.00	325.15
6 610	Sprint Corp. Attn Bankruptcy Dept PO Box 7949 Overland Park, KS 66207-0949	Unsecured		\$258.42	\$0.00	258.42
7 610	American InfoSource LP as agent for T Mobile/T-Mobile USA Inc PO Box 248848 Oklahoma City, OK 73124-8848	Unsecured		\$119.01	\$0.00	119.01
8 -2 610	AmeriCredit Financial Services, Inc. dba GM Financial P O Box 183853 Arlington, TX 76096	Unsecured		\$11,234.19	\$0.00	11,234.19
10 610	Capital One, N.A. c o Becket and Lee LLP POB 3001 Malvern, PA 19355-0701	Unsecured		\$1,138.62	\$0.00	1,138.62
11 610	Portfolio Recovery Associates, LLC POB 41067 Norfolk, VA 23541	Unsecured		\$675.89	\$0.00	675.89
12 610	Portfolio Recovery Associates, LLC POB 41067 Norfolk, VA 23541	Unsecured		\$1,017.86	\$0.00	1,017.86
13 610	Portfolio Recovery Associates, LLC POB 41067 Norfolk, VA 23541	Unsecured		\$1,050.20	\$0.00	1,050.20
<< Totals	;>>			115,509.54	63,128.04	52,381.50

TRUSTEE'S PROPOSED DISTRIBUTION

Exhibit D

0.00

8,802.35

Case No.: 15-81168-LMT

Case Name: HERNANDEZ, EVERARDO Trustee Name: BERNARD J. NATALE

Balance on hand:

16,860.49

Claims of secured creditors will be paid as follows:

Claim No.	Claimant	Claim Asserted	Allowed Amount of Claim	Interim Payments to Date	
9	AmeriCredit Financial Services, Inc.	21,171.51	21,171.51	0.00	0.00
EXEMPT	Everardo Hernandez	15,000.00	15,000.00	15,000.00	0.00
MEDLN1	Adult & Pediatric Orthopedics	710.00	710.00	710.00	0.00
MEDLN2	Integrity Medical	706.00	706.00	706.00	0.00
MEDLN3	American Diagnostic MRI	1,700.00	1,700.00	1,700.00	0.00
MEDLN4	Active Rehab & Wellness	4,254.69	4,254.69	4,254.69	0.00
MEDLN5	Optum United Health Care	7,439.31	7,439.31	7,439.31	0.00
SUBLN1	Farmers Insurance	5,000.00	5,000.00	5,000.00	0.00

Total to be paid to secured creditors: \$_____

Remaining balance: \$ 16,860.49

Applications for chapter 7 fees and administrative expenses have been filed as follows:

Reason/Applicant	Total Requested	Interim Payments to Date	^
Trustee, Fees - BERNARD J. NATALE	6,500.00	0.00	6,500.00
Attorney for Trustee, Fees - ATTY. BERNARD J. NATALE	2,246.25	0.00	2,246.25
Attorney for Trustee, Expenses - ATTY. BERNARD J. NATALE	56.10	0.00	56.10
Other Fees: Clark Jsten Zuccki Frost & Williams	26,666.66	26,666.66	0.00
Other Expenses: Clark Jsten Zuccki Frost & Williams	1,651.38	1,651.38	0.00

Total to be paid for chapter 7 administration expenses:

Remaining balance: \$ 8,058.14

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Applications for prior chapter fees and administrative expenses have been filed as follows:

Reason/Applicant				Total Requested	Interim Payments to Date	•
			None			·
	TD + 1 + 1	. 1 6	1 .	1	ф	0.00

Total to be paid for prior chapter administrative expenses: \$ 0.00 Remaining balance: \$ 8,058.14

In addition to the expenses of administration listed above as may be allowed by the Court, priority claims totaling \$1,398.48 must be paid in advance of any dividend to general (unsecured) creditors.

Allowed priority claims are:

Claim No	Claimant	Allowed Amount of Claim	•	_ *
3	Internal Revenue Service	1,398.48	0.00	1,398.48

The actual distribution to wage claimants included above, if any, will be the proposed payment less applicable withholding taxes (which will be remitted to the appropriate taxing authorities).

Timely claims of general (unsecured) creditors totaling \$21,009.16 have been allowed and will be paid *pro rata* only after all allowed administrative and priority claims have been paid in full. The timely allowed general (unsecured) dividend is anticipated to be 31.7 percent, plus interest (if applicable).

Timely allowed general (unsecured) claims are as follows:

Claim No	Claimant	Allowed Amount of Claim	Interim Payments to Date	Proposed Payment
1	Cavalry SPV I, LLC	1,711.68	0.00	542.58
2	Cavalry SPV I, LLC	2,963.88	0.00	939.52
4	Midland Credit Management, Inc as agent for	514.26	0.00	163.01
5	Capital One Bank (USA), N.A.	325.15	0.00	103.07
6	Sprint Corp.	258.42	0.00	81.92
7	American InfoSource LP as agent for	119.01	0.00	37.72
8 -2	AmeriCredit Financial Services, Inc.	11,234.19	0.00	3,561.11
10	Capital One, N.A.	1,138.62	0.00	360.93
11	Portfolio Recovery Associates, LLC	675.89	0.00	214.25

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12	Portfolio Recovery Associates, LLC	1,017.86	0.00	322.65
13	Portfolio Recovery Associates, LLC	1,050.20	0.00	332.90
	Total to be paid for timely gene	ms: \$	6,659.66	

Tardily filed claims of general (unsecured) creditors totaling \$ 0.00 have been allowed and will be paid *pro rata* only after all allowed administrative, priority and timely filed general (unsecured) claims have been paid in full. The tardily filed claim dividend is anticipated to be 0.0 percent, plus interest (if applicable).

Tardily filed general (unsecured) claims are as follows:

Remaining balance:

Claim No	Claimant		Allowed Amount of Claim	•	*			
None								
Total to be paid for tardy general unsecured claims:		s: \$	0.00					
Remaining balance:			\$	0.00				

Subordinated unsecured claims for fines, penalties, forfeitures, or damages and claims ordered subordinated by the Court totaling \$ 0.00 have been allowed and will be paid pro rata only after all allowed administrative, priority and general (unsecured) claims have been paid in full. The dividend for subordinated unsecured claims is anticipated to be 0.0 percent, plus interest (if applicable).

Subordinated unsecured claims for fines, penalties, forfeitures or damages and claims ordered subordinated by the Court are as follows:

Claim No	Claimant	Allowed Amount of Claim	•	*			
None							

Total to be paid for subordinated claims: \$ 0.00

Remaining balance: \$ 0.00

0.00